CLAIMS ONLY								Application Number			Filir	Filing Date			
								Applicant(s)							
								* May be used for additional claims or amendments							
CLAIMS	S AS FILED AFTER FIRST AFTER SECOND														
ļ	<u> </u>			IDMENT		DMENT		<u> </u>	1-4	Depend	Indep	Depend	Indep	Depend	
	Indep	Depend	.Indep	Depend	Indep	Depend		51	Indep	Depend	поср	Depend	11000	Dopoviis	
1	 							52						ļ	
3								53 54			 	 		 	
• 5	ļ <i>,</i> -							55 55				 	·	 	
- 6								56					ļ <u>. </u>		
.7						ļ		57 58		<u> </u>		ļ		 	
8 9	ļ	1					i	59							
10		/						60							
11							ļ	61 62				 		 	
12 13		 -					ľ	63							
14								64							
115							ŀ	65 66							
16							ı	67							
18								68							
19 20							ŀ	69 70							
21							į	71			:				
22							Į	72							
23 24							ŀ	73 74							
25								75							
26							ŀ	76 77							
27 28							ŀ	78							
29							Ī	79							
30							ŀ	80 81							
31 32							ŀ	82							
33			•.•					83							
34 35							-	84 85							
35		177 3					ŀ	86							
37							ļ	87							
38 39							1	88 89							
40							ŀ	90							
41								91		Ţ					
42 43							ŀ	92 93							
44							t	94							
45 46							F	95 96							
46						——	ŀ	96	+						
48								98							
49. 50							F	99 100							
Total			 -	 -			-	Total						$\neg \neg \neg$	
Indep							L	Indep							
Total Depend	₹-	-/ J	4	- T	4	_		Total	4	٦	◀-	_	4		
Total								Depend Total	1.						
Claims			1					Claims	_ : :]_						